

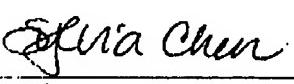
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/775,987
		Filing Date	02/10/2004
		First Named Inventor	Arneson et al.
		Group Art Unit	2635
Total Number of Pages in this Submission	10	Examiner Name	Jenkins, Kimberly Yvette
		Attorney Docket Number	CS23289RL

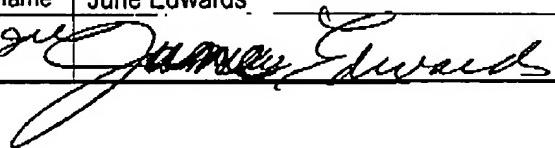
ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-Related papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter with appropriate copies
<input type="checkbox"/> Extension of time Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Response to Restriction Requirement
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Associate Power of Attorney
<input type="checkbox"/> Certified Copy of Priority Documents	<input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> RCE
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Sylvia Chen	Registration No.	39633
Signature			
Date	24 JAN 2006		

CERTIFICATE OF TRANSMITTAL/MAILING

I hereby certify that this correspondence is being facsimile transmitted to facsimile number 571-273-8300 or deposited with the United States Postal Service with sufficient postage thereon, as first-class mail, in an envelope addressed to:
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313 on the date listed below:

Typed or printed name	June Edwards
Signature	
Date January 24, 2006	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**APPLICANT:** ARNESON ET AL.**ART UNIT:** 2635**APPLN. NO.:** 10/775,987**EXAMINER:** Jenkins, Kimberly Yvette**FILED:** 02/10/2004**TITLE:** ELECTRONIC DEVICE WITH FORCE SENSING KEY**REPLY UNDER 37 C.F.R. § 1.116**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Responsive to the Final Office Action dated November 30, 2005, consideration of the following remarks and withdrawal of the current objections and rejections is respectfully requested.

Remarks begin on page 2 of this paper.